

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JRS	JRS	
O.L.P.E. CLASSIFIER		45	9/25
FORMALITY REVIEW	HE	829	10/25/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ----- Rejected      N ----- Non-elected  
 o ----- Allowed      I ----- Interference  
 - (Through numeral) ... Cancelled      A ----- Appeal  
 + ----- Restricted      O ----- Objected

Claim	Final	Original	Date
1	✓	✓	10/25/00
2	✓	✓	10/25/00
3	✓	✓	10/25/00
4	✓	✓	10/25/00
5	✓	✓	10/25/00
6	✓	✓	10/25/00
7	✓	✓	10/25/00
8	✓	✓	10/25/00
9	✓	✓	10/25/00
10	✓	✓	10/25/00
11	✓	✓	10/25/00
12	✓	✓	10/25/00
13	✓	✓	10/25/00
14	✓	✓	10/25/00
15	✓	✓	10/25/00
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17	✓	✓	10/25/00
18	✓	✓	10/25/00
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If more than 150 claims or 10 actions  
 staple additional sheet here

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